FEC FORM 1

## STATEMENT OF ORGANIZATION

| FORM 1   OHGANIZATION       |                        |                            |                  |  |                   |                 |                  |     |          |          |     |            |
|-----------------------------|------------------------|----------------------------|------------------|--|-------------------|-----------------|------------------|-----|----------|----------|-----|------------|
|                             | (See instructions)     |                            |                  |  |                   | Office use only |                  |     |          |          |     |            |
| NAME OF COMMITTEE (in       | full)                  | (Check if name is changed) | Example over the | : If typying, typ<br>lines                                       | ре                | 12FE            | 4M5              |     |          |          |     |            |
| Holding Onto                | Oregon's Prioritie     | es<br>                     |                  |  |                   |                 |                  | LL  |          |          | 1.1 | Ш          |
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| is changed)                 | Porti                  | and                        | ш                | шш   | ப                 | OR              |                  | Ш   | 97208    | <u> </u> |     | Ш          |
| COMMITTEE'S E-MAI           | IL ADDRESS             |                            | CITY▲            |  |                   | STATE           | •                |     | ZIP      | CODE     | •   |            |
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| COMMITTEE'S WEB             | PAGE ADDRESS (U        | RL)                        |                  |  |                   |                 |                  |     |          |          |     |            |
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| COMMITTEE'S FAX N           | JUMBER                 |                            |                  |  |                   |                 | I                |     |          |          |     |            |
|                             |                        |                            |                  |  |                   |                 |                  |     |          |          |     |            |
| 2. DATE 0.4                 |                        | 2008                       |                  |  |                   |                 |                  |     |          |          |     |            |
| 3. FEC IDENTIFICA           | TION NUMBER            |                            | C C0039          | 2738   |                   |                 |                  |     |          |          |     |            |
| 4. IS THIS STATEM           | IENT X NEW             | (N) OR                     |                  | AMENDED  | (A)               |                 |                  |     |          |          |     |            |
| I certify that I have exami | ned this Statement and | to the best of my know     | wledge and be    | lief it is true, co  | orrect and        | l complet       | е                |     |          |          |     |            |
| Type or Print Name of       | Treasurer <b>N</b>     | As. Melissa Karo           | lon              |  |                   |                 |                  |     |          |          |     |            |
| Signature of Treasurer      | Electronically File    | d by Ms. Meliss            | sa Kardon        |  | [                 | Date            | <sup>M</sup> 0 5 | M / | D 07     | / Y      | 20  | <b>8</b> 0 |
| NOTE: Submission of fal     |                        | nplete information may     |                  |  |                   |                 |                  |     | 2 U.S.C. | S437g    | -   |            |
| Office<br>Use<br>Only       |                        |                            | Fed<br>Tol       | further informateral Election Control Free 800-424-31 202-694-11 | Commissi<br>-9530 |                 |                  | F   | FEC F    | _        |     |            |

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